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PTO/SB/05 (12/97)
Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	17201.707	Total Pages	450
First Named Inventor or Application Identifier			
Philippe Harscoet			
Express Mail Label No.	EL322093492US		

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

Assistant Commissioner for Patents
ADDRESS TO: Box Patent Application
Washington, DC 20231

- | | |
|---|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages <u>24</u>]
(preferred arrangement set forth below)</p> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (37 CFR 1.152) [Total Sheets <u>3</u>]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages <u>2</u>]</p> <p>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
[Note Box 5 below]</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S)
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which
a copy of the oath or declaration is supplied under Box 4b,
is considered as being part of the disclosure of the
accompanying application and is hereby incorporated by
reference therein.</p> | <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents(s))</p> <p>9. <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement
(when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure
Statement (IDS)PTO-1449 <input type="checkbox"/> Copies of IDS
Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)</p> <p>14. <input checked="" type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application,
Statement(s) <input type="checkbox"/> Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s)
(if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other:</p> |
|---|--|

17. If a **CONTINUING APPLICATION**, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. ____/____

16. CORRESPONDING ADDRESS

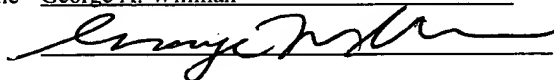
<input type="checkbox"/> Customer Number of Bar Code Label	021971	or <input checked="" type="checkbox"/> Correspondence address below	
(Insert Customer No. or Attach bar code label here)			
NAME			
ADDRESS	WILSON SONSINI GOODRICH & ROSATI 650 Page Mill Road		
CITY	Palo Alto	STATE	California
ZIP CODE	94304-1050		
COUNTRY	USA	TELEPHONE	(650) 493-9300
FAX	(650) 845-5000		

SUBMITTED BY

Typed or

Printed Name George A. Willman

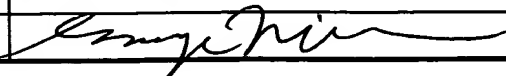
Signature



Reg. Number 41,378

Date July 2, 1999

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FEE TRANSMITTAL		Complete if Known																																																																																																																																																																																																																																																																																															
<p style="text-align: center; font-size: small;">Note: Effective October 1, 1997. Patent fees are subject to annual revision.</p>		<p>Application Number: Not assigned</p> <p>Filing Date: Herewith (July 2, 1999)</p> <p>First Named Inventor: Philippe Harscoet</p> <p>Group Art Unit: Not assigned</p> <p>Examiner Name: Not assigned</p> <p>Attorney Docket Number: 17201.707</p>																																																																																																																																																																																																																																																																																															
<p>TOTAL AMOUNT OF PAYMENT (\$) 105.00</p>		<p>METHOD OF PAYMENT (check one)</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: 23-2415 (17201.707)</p> <p>Deposit Account Name: Wilson Sonsini Goodrich & Rosati</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other</p>																																																																																																																																																																																																																																																																																															
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CLAIMS</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>Total Claims</th> <th>Extra</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>23 - 20 = 3</td> <td>X</td> <td>9</td> <td>27</td> </tr> <tr> <td>Independent Claims 3 - 3 = 0</td> <td>X</td> <td>39</td> <td>0</td> </tr> <tr> <td>Multiple Dependent Claims</td> <td>X</td> <td>260</td> <td>0</td> </tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Small Entity Fee Code</th> <th>Fee (\$)</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>203</td><td>18</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>202</td><td>78</td><td>39</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>204</td><td>260</td><td>130</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>109</td><td>209</td><td>82</td><td>39</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>210</td><td>18</td><td>0</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="5">SUBTOTAL (2) (\$)</td><td>27.00</td></tr> </tbody> </table>		Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid	101	201	760	380	Utility filing fee	380.00	106	206	310	155	Design filing fee		107	207	480	240	Plant filing fee		108	208	760	380	Reissue filing fee		114	214	150	75	Provisional filing fee		SUBTOTAL (1) (\$)					380.00	Total Claims	Extra	Fee from below	Fee Paid	23 - 20 = 3	X	9	27	Independent Claims 3 - 3 = 0	X	39	0	Multiple Dependent Claims	X	260	0	Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid	103	203	18	9	Claims in excess of 20		102	202	78	39	Independent claims in excess of 3		104	204	260	130	Multiple dependent claim		109	209	82	39	Reissue independent claims over original patent		110	210	18	0	Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)					27.00	<p>3. 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unavoidable</td><td></td></tr> <tr><td>141</td><td>241</td><td>1,320</td><td>660</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>242</td><td>1,320</td><td>660</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>243</td><td>450</td><td>225</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>244</td><td>670</td><td>335</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>222</td><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>223</td><td>50</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr> <tr><td>126</td><td>226</td><td>240</td><td>240</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>281</td><td>40</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>146</td><td>246</td><td>790</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>249</td><td>790</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="5">Other fee (specify) _____</td><td></td></tr> <tr><td colspan="5">* Reduced by Basic Filing Fee Paid</td><td></td></tr> <tr><td colspan="5">SUBTOTAL (3) (\$)</td><td>40.00</td></tr> </tbody> </table>		Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid	105	205	130	65	Surcharge - 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<p>SUBMITTED BY</p> <p>Typed or Printed Name: George A. Willman</p> <p>Signature: </p> <p>Date: 7/2/99</p>		<p>Complete (if applicable)</p> <p>Reg. Number: 41,378</p> <p>Deposit Account User ID: 23-2415 (17201.707)</p>																																																																																																																																																																																																																																																																																															

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.